

## BOOK REVIEWS

ditional assumptions about motherhood and conventional codes of mother 'surveillance.' The significance of Winterhalter's argument extends beyond the scope of literacy. She makes the insightful claim that "the linguistic economy" that surrounds women in general today constitutes a "cultural literacy of motherhood, arising out of a habitual way of understanding women and filtering the broad field" of their "perceptions and attitudes about their legitimacy." She advances the thesis that "women, both as mothers and non-mothers are read through a relationship to concepts of motherhood, a relationship that polices their points of entrance into the public sphere, where the pervasive discursive constructions of western society cast "good" women and motherhood as synonymous" (254).

Some of the chapters gesture toward a critique of what is defined as "skills-based, production-oriented demands of standardized teaching" (Bryant 86), and testing, but no systematic analysis of the operative dynamic behind this philosophy, and its implications for the successes or failures glimpsed through national literacy rates is ever offered. The collection indeed shows that literacy is "multiple, local and contextual," and its value lies in opening up spaces for continued scholarly dialogue that would seek to address these and similar issues as they pertain to women and mothers.

## **Bottled Up: How the Way We Feed Babies Has Come to Define Motherhood and Why It Shouldn't**

Suzanne Barston.

Los Angeles: University of California Press, 2012.

REVIEWED BY DIANA L. GUSTAFSON

Suzanne Barston's expressed purpose is to challenge the "one-size-fits-all strategy" for infant feeding (7). She poses the question, "Is breastfeeding really so superior that it justifies the guilt trip we heap on all these women, essentially scaring them into nursing?" (6) She argues that choosing not to breastfeed or being unable to breastfeed is considered a maternal failure because the breast-is-best or breast-is-normal mantras are used as the "yardstick by which parenting prowess is measured" (3). Her goal is to inform the conversation so that women's health and well-being and their confidence as mothers are not undermined by their infant feeding practices.

I admit that as a breastfeeding proponent, I was skeptical about the author's agenda. Barston addresses that concern early in the book stating that she is

not anti-breastfeeding, just advocating for mothers' empowered choice (12). This book also poses questions of central importance to those of us interested in advancing motherhood scholarship. What is the quality of the available evidence about infant feeding practices? What is the impact of breast-feeding versus bottle-feeding on mothers' physical and emotional well-being? How do the interests of medical research, politics, and global capitalism converge in the construction of the infant feeding debate?

Each of the six chapters (plus introduction) integrate insights from Barston's personal journey with interviews conducted with health professionals, researchers, and mothers to explore the intersections of embodied experience, health science and popular culture in the debate about breastfeeding and maternal responsibility. Her argument is supported by a critical reading of medical journals, feminist writings, breastfeeding literature, activist websites and Twitter feeds, parenting books, and discussions with women on her *Fearless Formula Feeder* blog.

Breastfeeding is generally considered the normal and responsible parenting choice. Choice is the operative word here and Barston sets out to understand the cultural ambivalence facing women who would choose to breastfeed, but cannot. She argues that infant feeding practices are the new battle zone for the "mommy wars", a term coined by Tracey Thompson to denote the struggle between so-called working moms and stay-at-home moms (15). She makes an interesting distinction between the substances (breast milk and the formula substitute) and the act of feeding an infant (breastfeeding and bottle-feeding) (158). She speculates that the conflation of the substance with the act may fuel the "negativity and zealotry" that characterize some messaging from breastfeeding advocates (159).

Women must sift through many mixed messages: From formula company information that soothes, "Breastfeeding is hard. Choose formula" (25) to feel-guilty posts aimed at the formula fed generation wondering, "who knows how much better [we] could have been?" (19). A activist website claimed, "[M]any are unaware of how the lack of breastmilk and the use of infant formula compromise the health and well being of children in the United States. These risks are well documented in medical literature" (22). She tracks the pro-breastfeeding messaging from its beginning with the Nestlé infant formula controversy and the World Health Organization International Code of Marketing Breastmilk Substitutes (aka WHO Code) to the current widespread support of medical authorities and some government agencies.

Barston claims that mothers who bottle-feed their infants receive these messages as coercive, judgmental, punitive, even vitriolic. She quotes one blogger who had switched to formula who wrote she "felt absolutely horrible

... like I was just the worst person in the world ... like I had failed [my child]" (159). Moreover, the heightened attention to women's infant feeding choices means that pregnant and new mothers become the target for health professionals' expert advice, unsolicited product information, and even strangers' admonitions about their infant feeding choice—all part of the "panoptic gaze" of maternal surveillance (47).

Barston notes that the "militant lactivism" of some advocacy groups (47) is rooted in studies linking formula feeding with a variety of ills: maternal depression (88), increased risk of diabetes and breast cancer (144), preventable infant death (147-148), infant obesity (141), and problems with maternal-infant attachment (84-85). Not only does Barston question the validity of some of these studies, she also rejects the lactation failure statistics as "vague estimates" that reduce women's legitimate reasons for not breastfeeding to a narrow set of biological conditions (58). She argues that these studies are used to buttress hospital initiatives, government policies and programs, and the edicts of medical professionals who support breastfeeding.

This investigation suggests a disjuncture between the supposed naturalness of breastfeeding and the lived experience of some women as well as a lack of definitive and reliable information about the complex reasons that women may not breastfeed. These reasons are as diverse as a mother's history of physical/sexual abuse, HIV infection, problems with body image, and medication use or an infant's developmental delays and milk protein allergies, and concerns about the environmental pollutants that may contaminate breast milk. The Baby-Friendly Hospital Initiative and some breastfeeding proponents seem disproportionately focused on infant wellbeing to the exclusion of maternal wellbeing. This seems like a lopsided and untenable position given the imperative to have a healthy parent caring for a newborn.

Barston's skill as a writer and editor for health and parenting publications is on display. Her turn of phrase is both provocative and witty, making this a readable book for both layperson and scholar. She constructs a well-supported and thoughtful argument skilfully blending her subjective voice with the work of feminist and breastfeeding scholars such as Linda Blum, Christina Bobel, Bernice Hausman, Susan Maushart, and Joan Wolf. She does, however, take feminists to task for ignoring the infant feeding debate, or at the very least, failing to complicate the social and economic global contexts in which such choices occur. She entreats us to advocate for contextualized evidence that supports empowered maternal decision-making in the infant feeding debate.

Despite all the positives, I was left yearning for a sturdy theoretical framing of the operationalization of choice, maternal empowerment and resistance,

and the global politicization of infant feeding practices. I accept that this may be an unfair critique given Barston's disciplinary background and her intended audience. That said, Barston's book provides those of us committed to feminist scholarship on mothering some theoretical paths to explore.

## **Have Milk, Will Travel: Adventures in Breastfeeding**

Rachel Epp Buller, ed.  
Bradford, ON: Demeter Press, 2013.

REVIEWED BY MELANIE FRASER

*Have Milk Will Travel* “reveals the lighter side of nursing ... the laugh-out-loud turbulence of life as the one-stop milk shop.” As this is the intention of the book, it's not surprising that the stories in it center on squirting milk, embarrassing men, and the difficulties of establishing breastfeeding.

It's a short collection of reflections by Americans. All the contributors are mothers but their brief biographies do not illuminate their racial or gender identities. First person narrative provides a voice for women to tell their own stories in their own words. However, it doesn't necessarily move into political commentary or feminism. There is a foreword by two lactation consultants and it would have been good to have heard insights from experts about the breastfeeding challenges that form the crux of several of the stories. The stories in the book, described in retrospect, do not necessarily explain much about breastfeeding or link to wider sociological discourse.

The front cover art is a linoleum block print by the editor, who is a feminist art historian. The picture is a breastfeeding child. I love seeing toddlers nurse, but the latch looks really uncomfortable. Nipple pulling can hurt! One of the reasons given for breastfeeding difficulties is that new mums don't know what nursing looks like—and thus disseminating information about good breastfeeding positioning and attachment is promoted by some maternalist organisations. But this picture looks painful to me.

As well as the front cover artwork there's a cartoon, a poem, and a photo. Overall the collection is similar to that on some blog or web sites, with a mixture of personal story and artistic self-expression.

As a UK reviewer, I didn't always understand all the abbreviations and perhaps some of the humour passed me by. Given the extensive maternity leave in the UK, many British mothers don't pump breastmilk at work and our culture around breastfeeding is slightly different from the U.S. I often have to do some translation though: not all U.S. situations map onto UK mothers.